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PTO/SB/21 (08-00)

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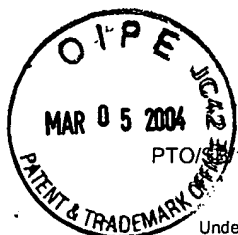
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TRANSMITTAL FORM		Application Number			
(to be used for all correspondence after initial filing)		09/988,878			
		Filing Date			
		November 19, 2001			
		First Named Inventor			
		A. Morad, et al.			
Group Art Unit		2613			
Examiner Name		Diep, Nhon Thanh			
Attorney Docket Number		13774US04			
Total Number of Pages in This Submission		12			
ENCLOSURES (check all that apply)					
<input checked="" type="checkbox"/> Fee Transmittal Form		<input type="checkbox"/> Assignment Papers (for an Application)			
<input checked="" type="checkbox"/> Fee Attached		<input type="checkbox"/> Drawing(s) (sheets)			
<input checked="" type="checkbox"/> Amendment/Reply		<input type="checkbox"/> Licensing-related Papers			
<input type="checkbox"/> After Final		<input type="checkbox"/> Petition			
<input type="checkbox"/> Affidavits/declaration(s)		<input type="checkbox"/> Petition to Convert to a Provisional Application			
<input checked="" type="checkbox"/> Extension of Time Request		<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address			
<input type="checkbox"/> Express Abandonment Request		<input type="checkbox"/> Terminal Disclaimer			
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PTO/US 17 (11-00)

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FEE TRANSMITTAL for FY 2004

Patent Fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$420.00)

Complete if Known

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METHOD OF PAYMENT		FEE CALCULATION (continued)																																																					
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to: Deposit Account Number: 13-0017 Deposit Account Name: McAndrews Held & Malloy <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		3. ADDITIONAL FEES																																																					
2. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other		Technology Center 2600																																																					
FEE CALCULATION																																																							
1. BASIC FILING FEE <table><thead><tr><th>Large Entity Code</th><th>Large Entity Fee (\$)</th><th>Small Entity Code</th><th>Small Entity Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>1001</td><td>770</td><td>2001</td><td>385</td><td>Utility filing Fee</td><td></td></tr><tr><td>1002</td><td>340</td><td>2002</td><td>170</td><td>Design filing Fee</td><td></td></tr><tr><td>1003</td><td>530</td><td>2003</td><td>265</td><td>Plant filing fee</td><td></td></tr><tr><td>1004</td><td>770</td><td>2004</td><td>385</td><td>Reissue filing fee</td><td></td></tr><tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td></td></tr><tr><td colspan="5">SUBTOTAL (1)</td><td>(\$0.00)</td></tr></tbody></table>		Large Entity Code	Large Entity Fee (\$)	Small Entity Code	Small Entity Fee (\$)	Fee Description	Fee Paid	1001	770	2001	385	Utility filing Fee		1002	340	2002	170	Design filing Fee		1003	530	2003	265	Plant filing fee		1004	770	2004	385	Reissue filing fee		1005	160	2005	80	Provisional filing fee		SUBTOTAL (1)					(\$0.00)												
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2. EXTRA CLAIM FEES <table><thead><tr><th>Total Claims</th><th>Extra Claims</th><th>Fee from below</th><th>Fee Paid</th></tr></thead><tbody><tr><td></td><td>- 20** =</td><td>x</td><td></td></tr><tr><td>Independent Claims</td><td>- 3** =</td><td>x</td><td></td></tr><tr><td>Multiple Dependent</td><td></td><td></td><td></td></tr></tbody></table> <table><thead><tr><th>Large Entity Code</th><th>Large Entity Fee (\$)</th><th>Small Entity Code</th><th>Small Entity Fee (\$)</th><th>Fee Description</th></tr></thead><tbody><tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td></tr><tr><td>1201</td><td>86</td><td>2201</td><td>43</td><td>Independent claims in excess of 3</td></tr><tr><td>1203</td><td>290</td><td>2203</td><td>145</td><td>Multiple dependent claim, if not paid</td></tr><tr><td>1204</td><td>86</td><td>2204</td><td>43</td><td>**Reissue independent claims over original patent</td></tr><tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>**Reissue claims in excess of 20 and over original patent</td></tr><tr><td colspan="5">SUBTOTAL (2)</td><td>(\$0.00)</td></tr></tbody></table>		Total Claims	Extra Claims	Fee from below	Fee Paid		- 20** =	x		Independent Claims	- 3** =	x		Multiple Dependent				Large Entity Code	Large Entity Fee (\$)	Small Entity Code	Small Entity Fee (\$)	Fee Description	1202	18	2202	9	Claims in excess of 20	1201	86	2201	43	Independent claims in excess of 3	1203	290	2203	145	Multiple dependent claim, if not paid	1204	86	2204	43	**Reissue independent claims over original patent	1205	18	2205	9	**Reissue claims in excess of 20 and over original patent	SUBTOTAL (2)					(\$0.00)		
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**or number previously paid, if greater; For Reissues, see above		SUBTOTAL (3) (\$420.00)																																																					

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Fredrick T. Frepich, III	Registration No. (Attorney or Agent)	52,545
Telephone	312-775-8000	Date	March 2, 2004

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